

HOUSE BILL REPORT

SHB 2430

As Passed House:
February 17, 2014

Title: An act relating to athletic trainers.

Brief Description: Concerning athletic trainers.

Sponsors: House Committee on Health Care & Wellness (originally sponsored by Representatives Riccelli, Schmick and Ormsby).

Brief History:

Committee Activity:

Health Care & Wellness: 1/23/14, 2/3/14 [DPS].

Floor Activity:

Passed House: 2/17/14, 81-16.

Brief Summary of Substitute Bill

- Permits athletic trainers to treat, rehabilitate, and recondition work-related injuries under the direct supervision of and in accordance with a plan of care established with certain health care providers.
- Permits the Department of Health to establish continuing education requirements for athletic trainers.

HOUSE COMMITTEE ON HEALTH CARE & WELLNESS

Majority Report: The substitute bill be substituted therefor and the substitute bill do pass. Signed by 12 members: Representatives Cody, Chair; Riccelli, Vice Chair; Schmick, Ranking Minority Member; Harris, Assistant Ranking Minority Member; Clibborn, Green, Jinkins, Manweller, Moeller, Morrell, Tharinger and Van De Wege.

Minority Report: Without recommendation. Signed by 3 members: Representatives DeBolt, G. Hunt and Ross.

Staff: Alexa Silver (786-7190).

Background:

This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not a part of the legislation nor does it constitute a statement of legislative intent.

The Department of Health (Department) licenses, establishes standards for, and disciplines athletic trainers. It is unlawful to practice or offer to practice as an athletic trainer without being licensed.

"Athletic training" means a licensed athletic trainer's application of the following principles:

- risk management and prevention of athletic injuries;
- recognition, evaluation, and assessment of athletic injuries;
- immediate care of athletic injuries;
- treatment, rehabilitation, and reconditioning of athletic injuries through the application of physical agents and modalities, therapeutic activities and exercise, standard reassessment techniques and procedures, commercial products, and educational programs in accordance with guidelines established with a licensed health care provider; and
- referral of an athlete to a licensed health care provider if the injury requires further care or is outside the athletic trainer's scope of practice.

"Athletic training" does not include most orthotic or prosthetic services, any medical diagnosis, prescribing drugs, or surgery. "Athletic injury" means an injury or condition sustained by an athlete that affects participation or performance in exercise, recreation, sport, or games. The injury or condition must be within the professional preparation and education of the athletic trainer.

Except as necessary to provide emergency care, an athletic trainer may not provide treatment, rehabilitation, or reconditioning services except as provided in guidelines established with a licensed health care provider (specifically, a physician, physician assistant, osteopathic physician, osteopathic physician assistant, advanced registered nurse practitioner, naturopath, physical therapist, chiropractor, dentist, massage practitioner, acupuncturist, occupational therapist, or podiatric physician and surgeon).

The Department has authority to develop and administer examinations, issue licenses, and adopt rules to implement the athletic trainer law.

Rules adopted by the Department of Labor & Industries (L&I) permit payment for physical medicine services for an injured worker provided by a medical or osteopathic physician who is board certified or board qualified in the field of physical medicine and rehabilitation, a licensed physical therapist, or an injured worker's attending doctor, within certain limitations. The physical medicine services must be personally performed by the physician, attending doctor, or physical therapist or by a physical therapy assistant employed by and serving under the direction of a physical therapist, physician, or attending doctor.

Summary of Substitute Bill:

"Athletic training" includes treatment, rehabilitation, and reconditioning of work-related injuries by an athletic trainer under the direct supervision of and in accordance with a plan of care for an individual worker established by a provider who is authorized to provide physical medicine and rehabilitation services for injured workers.

The Department of Health may establish continuing education requirements for athletic trainers.

Appropriation: None.

Fiscal Note: Available.

Effective Date: The bill takes effect 90 days after adjournment of the session in which the bill is passed.

Staff Summary of Public Testimony:

(In support) Athletic trainers are licensed health care providers skilled at providing services in youth, high school, college, professional, and clinical settings. Athletic trainers focus on rapid recovery and return to full function using methods that parallel and complement other health care team members. They can also help get injured workers back on the job using the same techniques as for athletes. This bill does not change the scope of practice or the skills used; it just allows athletic trainers to use their education and training to treat injured workers under the direction of a licensed health care provider.

Physical therapists are permitted to use assistive personnel, including athletic trainers. Health insurance companies provide full reimbursement for physical therapists delegating suitable tasks to athletic trainers, but the Department of Labor & Industries (L&I) does not. Current L&I rules preclude athletic trainers from treating injured workers. This is a hold-over from before athletic trainers were licensed. Injured workers are returning to work sooner in states that allow athletic trainers to co-treat in the workforce.

(With concerns) Athletic trainers work as assistive personnel in physical therapy clinics to perform specific tasks under the supervision of the physical therapist after the patient has been examined by the physical therapist. Return-to-work issues are different from return-to-sports issues. The L&I has strict rules allowing only physiatrists and physical therapists to treat and receive reimbursement for these services. The guidelines required in the bill are inadequate for rehabilitation of an injured worker. Unlike guidelines, a plan of care describes measurable goals based on a complete evaluation and diagnosis. The broad list of providers who could supervise an athletic trainer offers a backdoor way for an unauthorized provider to hire an athletic trainer to treat an injured worker, then get reimbursed by the L&I. This could increase costs without benefits to the worker or employer.

(Opposed) None.

Persons Testifying: (In support) Representative Riccelli, prime sponsor; Charlie Brown, Craig Bennett, and Mark Matney, Washington State Athletic Trainers' Association; and Stephen Schaffer.

(With concerns) Elaine Armantrout, Physical Therapy Association of Washington.

Persons Signed In To Testify But Not Testifying: None.